

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000084853

Entity Name: TRUTRIM INC.

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

27020 HARRISON RD.  
SIDEELL, FL 34266

**New Principal Place of Business:**

5317 FRUITVILLE RD  
STE 10  
SARASOTA, FL 34232

**Current Mailing Address:**

27020 HARRISON RD.  
SIDEELL, FL 34266

**New Mailing Address:**

5317 FRUITVILLE RD  
STE 10  
SARASOTA, FL 34232

FEI Number: 32-0026008

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MILLER, THOMAS A  
27020 HARRISON RD.  
SIDEELL, FL 34266 US

**Name and Address of New Registered Agent:**

MILLER, THOMAS A  
5317 FRUITVILLE RD  
STE 10  
SARASOTA, FL 34232 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

\_\_\_\_\_  
Electronic Signature of Registered Agent

04/30/2012

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: MILLER, THOMAS A  
Address: 5317 FRUITVILLE RD, STE 10  
City-St-Zip: SARASOTA, FL 34232

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: THOMAS A MILLER

PRES

04/30/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date